



Supplemental Application Data Sheet

Application Information

Application number::	10/656,509
Filing Date::	09/05/03
Application Type::	Regular
Subject Matter::	Utility
Suggested Group Art Unit::	N/A
CD-ROM or CD-R?::	None
Sequence submission?::	None
Computer Readable Form (CRF)?::	No
Title::	EDIBLE FILMS HAVING DISTINCT REGIONS
Attorney Docket Number::	HO-P02638US1
Request for Early Publication?::	No
Request for Non-Publication?::	No
Small Entity?::	No
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Larry
Family Name::	Gardner
City of Residence::	Port Murray
State or Province of Residence::	NJ
Country of Residence::	US
Street of mailing address::	50 Old Turnpike Rd.
City of mailing address::	Port Murray
State or Province of mailing address::	NJ
Postal or Zip Code of mailing address::	07865

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Nola
Family Name:: Bragg
City of Residence:: Hackettstown
State or Province of Residence:: NJ
Country of Residence:: US
Street of mailing address:: 409 Grand Ave.
City of mailing address:: Hackettstown
State or Province of mailing address:: NJ
Postal or Zip Code of mailing address:: 07840

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Jeannette
Family Name:: Dido
City of Residence:: Hoboken
State or Province of Residence:: NJ
Country of Residence:: US
Street of mailing address:: 463 First St. Apt. 4C
City of mailing address:: Hoboken
State or Province of mailing address:: NJ
Postal or Zip Code of mailing address:: 07030

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Mike
Family Name:: Webster

City of Residence:: Blairstown
State or Province of Residence:: NJ
Country of Residence:: US
Street of mailing address:: 11 Heller Hill Rd.
City of mailing address:: Blairstown
State or Province of mailing address:: NJ
Postal or Zip Code of mailing address:: 07825

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Laura
Family Name:: Paluch
City of Residence:: Yorba Linda
State or Province of Residence:: CA
Country of Residence:: US
Street of mailing address:: 5172 Wendover
City of mailing address:: Yorba Linda
State or Province of mailing address:: CA
Postal or Zip Code of mailing address:: 92886

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Tiffany
Middle Name:: L.
Family Name:: Bierer
City of Residence:: Fullerton
State or Province of Residence:: CA
Country of Residence:: US
Street of mailing address:: 2582 Associated Road, #9
City of mailing address:: Fullerton

State or Province of mailing address:: CA
Postal or Zip Code of mailing address:: 98235

Correspondence Information

Correspondence Customer Number:: 26271

Representative Information

Representative Customer Number:: 26271

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	An application claiming the benefit under 35 USC 119(e)	60/408,953	09/06/02

Assignee Information

Assignee name:: MARS INCORPORATED
Street of mailing address:: 6885 Elm Street
City of mailing address:: McLean
State or Province of mailing address:: VA
Postal or Zip Code of mailing address:: 22101-3883